2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # 602641

1. Entity Name

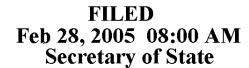
THE SURGICAL GROUP OF MIAMI, P.A.



Mailing Address Principal Place of Business

1321 N.W. 14TH STREET, STE., #306 MIAMI, FL 33125

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02032005 DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 59-1309980 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

KATZMAN, HOWARD E

1321 N.W. 14TH STREET STE. #306 MIAMI, FL 33125

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financial Trust Fund Contribution				\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALVAREZ, JOSE 1321 N.W. 14TH ST. #306 MIAMI, FL					
TITLE HAME STREET ADDRESS CITY-ST-ZIP	PD KATZMAN, HOWARD E. 1321 N.W. 14TH ST. #306 MIAMI, FL				000000245370 02728705-60023-016 150.00	
THILE NAME STREET ADDRESS CITY-ST-ZIP	T COELLO, ABILIO A. 1321 N.W. 14TH ST. #306 MIAMI, FL			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUA, IGNACIO 14321 NW 14TH ST MIAMI, FL 33125			IN '	THIS SPACE	
TITLE NAME STREET ACCRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

OR DIRECTOR